

To: Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399
(850) 487-6051

L02000016547

To whom it may concern:

Enclosed please find form "Articles of Organization for Florida Limited Liability Company" and a check in the amount of \$155.00 for the filing of that form (\$100.00 Filing Fee, \$25.00 Designation of Registered Agent, \$30.00 Certified Copy). The members of this Limited Liability Company are Hossein Alaie and Shala M. Alaie.

Please send all information to:
P.O. Box 887
Windermere, FL 34786

PHONE: (407) 445-1275

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-06/15/01--01104--001
****155.00 ****155.00

No1-14133

Thank You

BK

Sincerely,

Hossein Alaie

Hossein Alaie
Registered Agent

59-3718926

FILED
02 JUL -1 PM 5:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

June 20, 2001

HOSSEIN ALAIE
P.O. BOX 887
WINDERMERE, FL 34786

SUBJECT: SOUTHWEST ORLANDO ASSOCIATES, L.L.C.
Ref. Number: W01000014133

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for SOUTHWEST ORLANDO ASSOCIATES, L.L.C. and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

One registered agent is required.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6051.

Shawn Logan
Document Specialist

Letter Number: 801A00037436

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SOUTHWEST ORLANDO ASSOCIATES, L.L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

MAILING: P.O. Box 887

WINDERMERE, FL 34786

STREET: 7474 DORSCHER ROAD

ORLANDO, FL 32818

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

HOSSEIN ALAIE AND SHALA M. ALAIE (HA)

Name

7474 DORSCHER ROAD (HA)

Florida street address (P.O. Box NOT acceptable)

ORLANDO FL 32818

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Hossein Alaie (HA)

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Hossein Alaie (HA)
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

HOSSEIN ALAIE (HA)
Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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